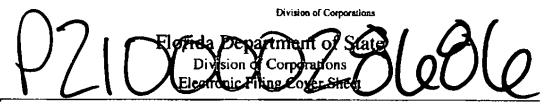
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To:

Division of Corporations

Pax Number

: (850)617-6380

Prom:

Account Name : PERMITTING SPECIALIST OF FOOD & BEVERAGE INC

Account Number : 120190000062 Phone : (239)850-9451

Pax Number : (866)929-0535

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Boots Address: OFFICE ONE CLEONING Danail Com

021 OCT 13 AM 9:

COR AMNU/RESTATE/CORRECT OR O/D RESIGN BLT EATS, INC.

Certificate of Status	0
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OCT 1 4 2021

S. PRATHER

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Help

(H21000382837-3) COVERLETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLT EATS, INC				
DOCUMENT NUMBER: P21000028686				
The enclosed Articles of	Amendment and fee are sui	bmitted for filing.		
Please return all corresp	ondence concerning this mai	tter to the following:		
В	ENJAMIN JOLLOFF			
_		Name of Contact Person	1	
В	LT EATS, INC			
_	Firm/ Company			
1	4101 TONKEL RD			
	Address			
F	ORT WAYNE, IN 46845			
-		City/ State and Zip Code	;	
o	fficeonecteaning@gmail.cor	n		
_	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
BENJAMIN JOLLOFF		at (<u>260</u>) 273-0092	
Name of Contact Person			le & Daytime Telephone Number	
Enclosed is a check for t	the following amount made	payable to the Florida Depa	urtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. B	ng Address dment Section on of Corporations lox 6327 assee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303	

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	Articles of Amen		-	
	to		Ĺ c	5
	Articles of Incorp	oration	b>∺	
	of		A-	: <u>C</u>
BLT EATS, INC			SS	2021 OCT 13
(Name	of Corporation as currently file	ed with the Florida Dep	L of State)	
P21000028686			77	
	(Document Number of Co	rporation (if known)	ORIO	!
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flor</i>	ida Profit Corporation a	'5	w
A. If amending name, enter the new n	ame of the corporation:			
			The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A pr			
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
	-			_
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)				- -
D. If amending the registered agent are new registered agent and/or the new	v registered office address:	in Florida, enter the na	me of the	_
Name of New Registered Agent	BENJAMIN JOLLOFF			
	1341 SE 34TH TERRACE			
	(Florida street a	ddress)	· •	
New Registered Office Address:	CAPE CORAL		, Florida 33904 (Zip Code)	
	(City	<i>'</i>)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regist Beneau	ered agent. I am familiar with		·	
	Signature of New Regist	tered Agent if changing		
	Olerman o of them steeping	ar an erbann, it britainging		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John	1 Doe			
X Remove	<u>V</u> <u>Mik</u>	Mike Jones			
_X Add	<u>SV</u> <u>Sall</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Address</u>		
I) Change	SEC	JOLLOFF, BEVERLY J	440 LANE 101 JIMMERSON LK		
X Add			ANGOLA, IN 46703		
Remove					
2) X Change	V PRES	JOLLOFF, CRAIG R	440 LANE 101 JIMMERSON LK		
Add			ANGOLA, IN 46703		
Remove Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add			<u> </u>		
Remove					
6) Change					
Add					
Remove					

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	eets, if necessary).	icles, enter change(s) here: (Be specific)		
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an amendment provisions for impl (if not applicable	royides for an excl lementing the ame le, indicate N/A)	nange, reclassification, or cancellation of cancellation of cancellation of contained in the americal cancellation of cancella	n of issued shares, adment itself:	
an amendment pr provisions for impl (if not applicable	ovides for an exclementing the ame	nange, reclassification, or cancellation of cancellation and ment if not contained in the ame	on of issued shares, adment itself:	
an amendment pr rovisions for impi (if not applicable	covides for an exclementing the ame	nange, reclassification, or cancellation of ca	on of issued shares, adment itself:	
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an amendment provisions for impl (if not applicable	royldes for an excl lementing the ame le, indicate N/A)	nange, reclassification, or cancellation of ca	on of issued shares, adment itself:	
an amendment provisions for impi	royides for an excl lementing the ame le, indicate N/A)	nange, reclassification, or cancellation and the ame	on of issued shares, adment itself:	

	(H210003828373)	
The date of each amendment(date this document was signed.		, if other than the
Effective date if applicable:	October 13, 2021	
Directive date in applicable.	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators, or board of directors without shareholder action and	i shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
* *	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	FILED 2021 OCT 13 AM SECRETARY OF TALLAHASSEE. F
	cast for the amendment(s) was/were sufficient for approval	FILE 2021 OCT 13 SECKLTARY (ALLAHASSEE
ъу	(voting group)	
Octobe Dated	er 13, 2021	9: 33 STATE LORIDA
Signature	Buy R. Juff	
(By	a director, president or other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	BENJAMIN R JOLLOFF	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	